

1 BEFORE THE ARIZONA MEDICAL BOARD

2 In the Matter of

3 **ROGER B. OLADE, M.D.**

4 Holder of License No. 32339
5 For the Practice of Allopathic Medicine
6 In the State of Arizona

Case No. MD-13-0161A

**ORDER FOR LETTER OF REPRIMAND
AND CONSENT TO THE SAME**

7 Roger B. Olade, M.D. ("Respondent") elects to permanently waive any right to a
8 hearing and appeal with respect to this Order for Letter of Reprimand; admits the
9 jurisdiction of the Arizona Medical Board ("Board"); and consents to the entry of this Order
10 by the Board.

11 **FINDINGS OF FACT**

12 1. The Board is the duly constituted authority for the regulation and control of
13 the practice of allopathic medicine in the State of Arizona.

14 2. Respondent is the holder of license number 32339 for the practice of
15 allopathic medicine in the State of Arizona.

16 3. The Board initiated case number MD-13-0161A after receiving notification of
17 a malpractice settlement involving Respondent's care and treatment of a 42 year-old male
18 patient ("JR") alleging failure to correct hypoglycemia, hyponatremia and anemia; failure to
19 adequately monitor and assess the patient, conduct an adequate examination of the
20 patient and collect history; and inadequate communication between providers.

21 4. On August 23, 2007, JR presented to the Emergency Room ("ER") after
22 falling on both of his knees. Chronic alcohol abuse was noted and labs were ordered. Lab
23 abnormalities were called to Respondent by the ER staff, including findings consistent with
24 severe end-stage liver disease. Respondent prescribed Vitamin K as well as a normal
25 saline bolus. IV dextrose was not ordered. Respondent noted that JR received orange

1 juice and crackers. The medical records do not mention any order or a nurse note
2 documenting that orange juice and crackers were given. No further care was noted to
3 document improvement in JR's low glucose or sodium levels. JR's urine was consistent
4 with infection as was a blood white cell count of 21.8. No antibiotics were administered.

5 5. Respondent wrote orders for admission to the Intensive Care Unit ("ICU").
6 Respondent's orders did not indicate any further blood glucose checks, repeat sodium
7 levels, or telemetry monitoring. Respondent documented in the ICU orders that JR was in
8 good condition and the labs recorded by Respondent did not indicate the low glucose
9 initially called to Respondent from the ER. On the morning of August 24, 2007, while
10 awaiting transfer to the ICU, JR was found with no signs of life and pronounced dead.

11 6. The Medical Consultant ("MC") found that the manner in which Respondent
12 treated JR's low blood sugar was concerning, and that the lack of repeating further blood
13 glucose checks to ensure that the low glucose was improving and/or corrected is a breach
14 in the standard of care. The MC found that Respondent additionally deviated from the
15 standard of care regarding Respondent's failure to correct and recheck JR's low sodium.

16 7. The standard of care requires a physician to correct a critically low blood
17 sugar in the most effective manner, such as the use of intravenous dextrose followed by
18 oral intake.

19 8. Respondent deviated from the standard of care by failing to correct JR's
20 critically low blood sugar, and by failing to repeat further blood glucose to ensure
21 improvement.

22 9. The standard of care requires a physician to treat a severely low sodium
23 level with hypertonic saline followed by fluid restriction and repeat labs to ensure
24 improvement.

10. Respondent deviated from the standard of care by failing to correct and recheck JR's low sodium levels.

11. The lack of intravenous glucose and failure to recheck the low blood glucose clearly placed JR at actual harm. Given the significant increase in mortality for the low sodium, there is actual harm in not aggressively treating and rechecking to ensure improvement.

12. There was potential harm to JR in that there was no order for monitoring JR's condition.

CONCLUSIONS OF LAW

1. The Board possesses jurisdiction over the subject matter hereof and over Respondent.

2. The conduct and circumstances described above constitute unprofessional conduct pursuant to A.R.S. § 32-1401(27)(e) (“[f]ailing or refusing to maintain adequate records on a patient.”).

3. The conduct and circumstances described above constitute unprofessional conduct pursuant to A.R.S. § 32-1401(27)(q) (“[a]ny conduct or practice that is or might be harmful or dangerous to the health of the patient or the public”).

ORDER

IT IS HEREBY ORDERED THAT Respondent is issued a Letter of Reprimand.

DATED AND EFFECTIVE this 3rd day of OCTOBER, 2013.

ARIZONA MEDICAL BOARD

By 
Lisa S. Wynn
Executive Director

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CONSENT TO ENTRY OF ORDER

1. Respondent has read and understands this Consent Agreement and the stipulated Findings of Fact, Conclusions of Law and Order ("Order"). Respondent acknowledges he has the right to consult with legal counsel regarding this matter.

2. Respondent acknowledges and agrees that this Order is entered into freely and voluntarily and that no promise was made or coercion used to induce such entry.

3. By consenting to this Order, Respondent voluntarily relinquishes any rights to a hearing or judicial review in state or federal court on the matters alleged, or to challenge this Order in its entirety as issued by the Board, and waives any other cause of action related thereto or arising from said Order.

4. The Order is not effective until approved by the Board and signed by its Executive Director.

5. All admissions made by Respondent are solely for final disposition of this matter and any subsequent related administrative proceedings or civil litigation involving the Board and Respondent. Therefore, said admissions by Respondent are not intended or made for any other use, such as in the context of another state or federal government regulatory agency proceeding, civil or criminal court proceeding, in the State of Arizona or any other state or federal court.

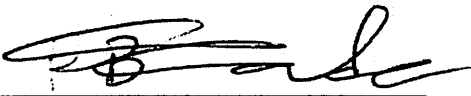
6. Upon signing this agreement, and returning this document (or a copy thereof) to the Board's Executive Director, Respondent may not revoke the consent to the entry of the Order. Respondent may not make any modifications to the document. Any modifications to this original document are ineffective and void unless mutually approved by the parties.

1 7. This Order is a public record that will be publicly disseminated as a formal
2 disciplinary action of the Board and will be reported to the National Practitioner's Data
3 Bank and on the Board's web site as a disciplinary action.

4 8. If any part of the Order is later declared void or otherwise unenforceable, the
5 remainder of the Order in its entirety shall remain in force and effect.

6 9. If the Board does not adopt this Order, Respondent will not assert as a
7 defense that the Board's consideration of the Order constitutes bias, prejudice,
8 prejudgment or other similar defense.

9 10. Any violation of this Order constitutes unprofessional conduct and may result
10 in disciplinary action. A.R.S. § § 32-1401(27)(r) ("[v]iolating a formal order, probation,
11 consent agreement or stipulation issued or entered into by the board or its executive
12 director under this chapter") and 32-1451.

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14 
15 ROGER B. OLADE, M.D.

DATED: 09/05/13

16 EXECUTED COPY of the foregoing mailed
17 this 3rd day of October, 2013 to:

18 Roger B. Olade, M.D.
19 Address of Record

20 ORIGINAL of the foregoing filed
21 this 3rd day of October, 2013 with:

22 Arizona Medical Board
23 9545 E. Doubletree Ranch Road
24 Scottsdale, AZ 85258

25 
Arizona Medical Board Staff